



PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Box ISSUE FEE**
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7390

01/22/2003

MR S H D WORETSKY
A T & T CORP
P O BOX 4110
MIDDLETOWN, NJ 07748

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmittal.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box here Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Cindy J. Margalit	(Depositor's name)
<i>[Signature]</i>	(Signature)
4-11-03	(Date)

09/353,461 07/13/1999

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09353,461	07/13/1999	VIJAY K. BHAGAVATH	113526	3577

TITLE OF INVENTION: NETWORK-BASED SERVICE FOR RECIPIENT-INITIATED AUTOMATIC REPAIR OF IP MULTICAST SESSIONS

network-based service for recipient-initiated
automatic repair of IP multicast sessions

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$0	\$1300	04/22/2003

04/22/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
BADEMAN, SCOTT T	2184	714-018000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1	_____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

AT&T Corp. (B) RESIDENCE: (CITY AND STATE OR COUNTRY)

New York, NY 10013

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies 3

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ If the Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 401-76795 (enclose an extra copy of this form).

Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

Cindy J. Margalit

4-11-03

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